

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mr</i>	<i>96.7</i>	<i>11/02/00</i>
O.I.P.E. CLASSIFIER	<i>Doc</i>	<i>72340</i>	<i>11-7-00</i>
FORMALITY REVIEW			<i>11-27-00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

Through numeral

Rejected	N	Non-elected
Allowed	I	Interference
Canceled	A	Appeal
Restricted	O	Objected

Claim	Final	Original	Date	Claim	Final	Original	Date	Claim	Final	Original	Date
				51				101			
				52				102			
				53				103			
				54				104			
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				99				149			
				100				150			

If more than 150 claims or 10 actions  
staple additional sheet here

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